



## ENCOUNTER KEYS

### AHCCCS

#### Age Change

The minimum age has been changed for CPT code **90672** (Influenza Virus Vaccine, Quadrivalent, Live, For Intranasal Use) to minimum age 2 years and maximum age 18 years.

#### Balance Error 40913:

The Adjudication Service Line information does not balance. Formula used sum of Loop 2430

CAS adjustments, #S2430CASTotals# + Loop 2430 SVD02 Adjudication Line payment,

#S2430SVD02Amt# = Loop 2400 SV102 Service Line amount, #S2400ServiceLineAmt#.

We have identified that the above validation error 40913 is being reported incorrectly and affects 837 Encounter file submissions to AHCCCs. The issue does not affect files uploaded to the

Community Manager portal for validation purposes. This balancing error is being returned incorrectly for encounters that involve multiple payers. As a workaround, we have changed the severity for error 40913 on 7/11/13 to a warning to allow the affected encounters to pass through. To resubmit the affected encounters would be appropriate.

Please keep in mind that this will prevent us from identifying encounters that may have a true out of balance condition. You will be notified by DHCM for true balancing errors. We will inform you when the correction has been moved to production and the error 40913 has been reinstated back to an error severity.

#### Frequency Limits

The Frequency Limit #1 for the CPT code **58615** (Occlusion Of Fallopian Tube(s) By Device (e.g., Band, Clip, Falope Ring) Vaginal or Suprapubic Approach)) is now 3.

#### **Inside this issue:**

Age Change; Balance Error 40913; Frequency Limits	1
Date Changes New Codes	2
Coverage Code Changes	3
Code Changes	4
Laboratory Indica- tors Modifier(s)	5 5-6
Place of Service	7
Provider Type	8-9
Revenue Codes	9

**Date Changes**

- The end date has been removed from the ICD-9 code **31.3** (Other Incision of Larynx or Trachea).
- The HCPCS code Q0505 (Miscellaneous Supply or Accessory For use With Ventricular Assist Device) has been **end dated** with an effective date of May 31, 2013
- The Effective Ending Date has been changed to 99/99/9999 for the Place of Service 20 (Urgent Care Facility) for the CPT code **10180** (Incision and Drainage, Complex, Postoperative Wound Infection).

**New Codes**

Effective for dates of service April 1, 2013 the HCPCS codes below have been added to the AHCCCS PMMIS system, with a Place of Service 12 (Home); and with the Modifiers listed below.

Code	Description
Q0507	Miscellaneous Supply Or Accessory For Use With An External Ventricular Assist Device
Q0508	Miscellaneous Supply or Accessory For Use With An Implanted Ventricular Assist Device
Q0509	Miscellaneous Supply Or Accessory For Use With Any Implanted Ventricular Assist Device

Modifier	Description	Modifier	Description
CR	Catastrophe/Disaster	KH	DMEPOS Item, Initial Claim, Purchase or First Month Rental
FB	Item Provided Without	KI	DMEPOS Item, Second or Third Month Rental
FC	Partial Credit, Replacement	KX	Requirements Specified in the Medical Policy Have Been Met
GA	Require Liability Notice	NR	New When Rented/AMB S
GK	Actual Item/Svs By Ph	NU	New Equipment
GY	Item or Service Statutorily Excluded	RA	Replacement of a DME or Orthotic or Prosthetic Item
GZ	Item or Service Expected to be denied as not Reasonable & Necessary	RB	Replace Part Of DME/Orthotic or Prosthetic Item
KB	Beneficiary Requested Upgrade	RR	Rental/DME

**Code Update(s)**

Effective for dates of service on or after January 1, 2012 the DX codes listed below have an AHCCCS Coverage code of 01 (Covered Service/Code Available):

35.05	Endovascular replacement of aortic valve
35.06	Transapical replacement of aortic valve
35.07	Endovascular replacement of pulmonary valve
35.08	Transapical replacement of pulmonary valve
35.09	Endovascular replacement of unspecified heart

**Coverage Code Changes**

- Effective for January 1, 2013 the coverage code 04 (Not Covered Service/Code Not Available) has been applied to the following CPT codes:

Code	Description
90785	Interactive Complexity (List Separately In Addition To The Code For Primary Procedure)
90839	Psychotherapy For Crisis; First 60 Minutes
90840	Psychotherapy For Crisis; Each Additional 30 Minutes (List Separately In Addition To Code For Primary Service)
90863	Pharmacologic Management, Including Prescription And Review Of Medication, When Performed With Psychotherapy Services (List Separately In Addition To The Code For Primary Procedure)

- Effective for dates of service on or after October 1, 2013 the coverage code for the following codes has been changed to 02 (Not Covered Service/Code Available):

Code	Description
97810	Acupuncture, 1 Or More Needles; Without Electrical Stimulation, Initial 15 Minutes Of Personal One-On-One Contact With The Patient
97811	Acupuncture, 1 Or More Needles; Without Electrical Stimulation, Each Additional 15 Minutes Of Personal One-On-One Contact With The Patient, With Re-Insertion Of Needle(s) (List Separately In Addition To Code For Primary Procedure)
97813	Acupuncture, 1 Or More Needles; With Electrical Stimulation, Initial 15 Minutes Of Personal One-On-One Contact With The Patient
97814	Acupuncture, 1 Or More Needles; With Electrical Stimulation, Each Additional 15 Minutes Of Personal One-On-One Contact With The Patient, With Re-Insertion Of Needle(s) (List Separately In Addition To Code For Primary Procedure)
H0043	Supported Housing, Per Diem
H0046	Mental Health Services, Not Otherwise Specified
S9986	Not Medically Necessary Service (Patient Is Aware That Service Not Medically Necessary)
T1013	Sign Language Or Oral Interpretive Services, Per 15 Minutes

**Code Changes**

- Effective for the dates of service on the listed CPT codes below the following changes have been added to the CPT codes.

Provider Type	43	Ambulatory Surgical Center
Place of Service	24	Ambulatory Surgical Center
Modifier	SG	AMB SURG CTR (ASC) FA
Revenue Code	0490	AMBUL SURG

Code	Description	Effective Date
27006	Tenotomy, Abductors And/Or Extensor(s) Of Hip, Open (Separate Procedure).	August 1, 2012
27025	Fasciotomy, Hip Or Thigh, Any Type	August 1, 2012
88333	Pathology Consultation During Surgery; Cytologic Examination (e.g., Touch Prep, Squash Prep), Initial Site	November 1, 2012
92015	Determination Of Refractive State	January 1, 2012
92018	Ophthalmological Examination and Evaluation, Under General Anesthesia, with or without Manipulation of Globe for Passive Range of Motion or Other Manipulation to Facilitate Diagnostic Examination; Complete	January 1, 2012

- The HCPCS code Q0505 (Miscellaneous Supply or Accessory For Use With Ventricular Assist Device) has been **end dated** with an effective date of May 31, 2013.
- Had CPT code 90792 (Psychiatric Diagnostic Evaluation with Medical Services) **has been removed from PT 11 (Psychologist)**.

## **Laboratory Indicators**

The laboratory indicators “C” (CLIA Waived Test) has been removed from CPT codes **86386** (Nuclear Matrix Protein 22 (NMP22), Qualitative) and **86803** (Hepatitis C Antibody).

## **Modifier**

- Effective for dates of service on or after August 1, 2012 the modifier 50 (Bilateral Procedure (Pay 50%)) has been added to the CPT code **20550** (Injection(s); Single Tendon Sheath, Or Ligament, Aponeurosis (e.g., Plantar "Fascia")).
- Effective for dates of service on or after April 1, 2013 the modifier QW (CLIA Waived Test) has been added to the CPT codes **86386** (Nuclear Matrix Protein 22 (NMP22), Qualitative) and **86803** (Hepatitis C Antibody).
- The modifiers listed below have been added to the CPT Code **93925** (Duplex Scan of Lower Extremity Arteries or Arterial Bypass Grafts; Complete Bilateral Study) with an effective for date of service January 1, 2012:

<b>Modifier</b>	<b>Description</b>
AS	PA SVCS For Assistant
80	Assistant Surgeon
81	Minimum Assistant Sur
82	Assist Surg/Qual Resi

- Effective for the dates of service on or after January 1, 2012 the modifier 51 (Multiple Procedures) has been added to the CPT code **23405** (Tenotomy, Shoulder Area; Single Tendon).
- Effective for the dates of service March 30, 2011 the modifier AS (PA SVCS for Assistant/at Surgery) has been added to the Provider Type 19 (Registered Nurse Practitioner) for the CPT code **27245** (Treatment of Intertrochanteric, Peritrochanteric, Or Subtrochanteric Femoral Fracture; With Intramedullary Implant, With Or Without Interlocking Screws And/Or Cerclage).
- Effective for the dates of service on or after January 1, 2013 the modifier FP (Family Planning Service) has been added to the HCPCS code **J1050** (Injection, Medroxyprogesterone Acetate, 1 mg).
- Effective for dates of service on or after November 1, 2012 the modifier GN (Amb Hsp 2SNF/OP Speech Lang POFC) has been added to the CPT code **92633** (Auditory Rehabilitation; Post-Lingual Hearing Loss).
- Effective for dates of service on or after January 1, 2012 the modifier SG (Ambulatory Surgical Center) has been added to the CPT code **27727** (Repair of Congenital Pseudarthrosis, Tibia).
- Effective for the dates of service on or after October 1, 2012 the modifier AS (PA SVCS for Assistant) has been added to the CPT code **59514** (Cesarean Delivery Only) for the PT 09 (Certified Nurse-Midwife).

- Effective for dates of service on or after July 1, 2013 the modifier JE (AMB TRIP NONHSPBSD DL) has been added to the following HPCPS codes:

CODE	DESCRIPTION	COD E	DESCRIPTION	CODE	DESCRIPTION
A4802	Protamine sulfate, for hemodialysis, per 50 mg	J1270	Injection, doxercalciferol, 1 mcg	J2795	Injection, ropivacaine HCl, 1 mg
C9121	Injection, argatroban, per 5 mg	J1642	Injection, heparin sodium, (heparin lock flush), per 10 units	J2916	Injection, sodium ferric gluconate complex in sucrose injection, 12.5 mg
J0610	Injection, calcium gluconate, per 10 ml	J1644	Injection, Heparin sodium, per 1000 units	J2993	Injection, reteplase, 18.1mg
J0630	Injection, calcitonin salmon, up to 400 units	J1740	Injection, ibandronate sodium, 1 mg	J2997	Injection, alteplase recombinant, 1 mg
J0636	Injection, calcitriol, 0.1 mcg	J1750	Injection, iron dextran, 50 mg	J3364	Injection, urokinase, 5,000 IU vial
J0670	Injection, mepivacaine HCl, per 10 ml	J1756	Injection, iron sucrose, 1 mg	J3365	Injection, IV, urikase, 250,000 IU vial
J0878	Injection, daptomycin, 1 mg	J1940	Injection, furosemide, up to 20 mg	J3370	Injection, vancomycin HCl, 500 mg
J0882	Injection, darbepoetin alfa, 1 mcg (for ESRD on dialysis)	J1945	Injection, lepirudin, 50 mg	J3410	Injection, hydroxyzine HCl, up to 25 mg
J0886	Injection, epoetin alfa, 1000 units (for ESRD on dialysis)	J1955	Injection, levocarnitine, per 1 gm	J3420	Injection, vitamin B-12 cyanocobalamin, up to 1,000 mcg
J0890	Injection, peginesatide, 0.1 (for ESRD on dialysis)	J2001	Injection, lidocaine HCl for intravenous infusion, 10 mg	J3487	Injection, soledroniz acid (Zometa), 1 mg
J0895	Injection, deferoxamine mesylate, 500 mg	J2150	Injection, mannitol, 25% in 50 ml	Q0139	Injection, ferumoxytol, for treatment of iron deficiency anemia, 1 mg (for ESRD on dialysis)
J1200	Injection, diphenhydramine HCl, up to 50 mg	J2430	Injection, pamidronate disodium, per 30 mg	Q0163	Diphenhydramine HCl, 50 mg, oral, FDA approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at time of chemotherapy treatment not to exceed a 48-hour dosage regimen
J1205	Injection, chlorothiazide sodium, per 500 mg	J2501	Injection, paricalcitol, 1 mcg	Q4081	Injection, epoetin alfa, 100 units (for ESRD on dialysis)
J1240	Injection, demenhydrinate, up to 50 mg	J2720	Injection, protamine sulfate, per 10 mg	S0169	Calcitriol, 0.25 mcg

**Place of Service (POS)**

- Effective for dates of service on or after December 01, 2012 the POS 11 (Office) has been added to the CPT code **35011** (Direct Repair of Aneurysm, Pseudoaneurysm, Or Excision (Partial or Total) And Graft Insertion, with or Without Patch Graft; For Aneurysm and Associated Occlusive Disease, Axillary-Brachial Artery, By Arm Incision).
- Effective for dates of service on or after January 1, 2012 the POS 22 (Outpatient Hospital) and 24 (Ambulatory Surgical Center) have been added to the CPT code **27727** (Repair of Congenital Pseudarthrosis, Tibia).
- Effective for dates of service on or after January 1, 2013 the POS 11 (Office) has been added to the CPT codes: **00810** (Anesthesia for Lower Intestinal Endoscopic Procedure and **00740** (Anesthesia For Upper Gastrointestinal Endoscopic Procedures, Endoscope Introduced Proximal to Duodenum).
- Effective for dates of service January 1, 2012 the POS 23 (Emergency Room – Hospital) has been added to the CPT code **43249** (Upper Gastrointestinal Endoscopy Including Esophagus, Stomach, And Either The Duodenum and/or Jejunum As Appropriate; With Balloon Dilation Of Esophagus (Less Than 30 Mm Diameter).
- Effective for dates of service on or after January 1, 2013 the POS 13 (Assisted Living Facility); 31 (Skilled Nursing Facility) and 32 (Nursing Facility) can be reported with the following CPT codes:

Code	Description
90832	Psychotherapy, 30 Minutes With Patient and/or Family Member
90833	Psychotherapy, 30 Minutes With Patient and/or Family Member When Performed With An Evaluation And Management Service (List Separately In Addition To The Code For Primary Procedure)
90834	Psychotherapy, 45 Minutes With Patient and/or Family Member
90836	Psychotherapy, 45 Minutes With Patient and/or Family Member When Performed With An Evaluation And Management Service (List Separately In Addition To The Code For Primary Procedure)
90837	Psychotherapy, 60 Minutes With Patient and/or Family Member
90838	Psychotherapy, 60 Minutes With Patient and/or Family Member When Performed With An Evaluation And Management Service (List Separately In Addition To The Code For Primary Procedure)



**Provider Type (PT)**

- Effective for dates of service on or after January 1, 2012 the PT 19 (Registered Nurse Practitioner) can now report the CPT codes:

**22633** (Arthrodesis, Combined Posterior Or Posterolateral Technique With Posterior Interbody Technique Including Laminectomy And/ Or Discectomy Sufficient To Prepare Interspace (Other Than For Decompression), Single Interspace And Segment; Lumbar)).

**22634** (Arthrodesis, Combined Posterior Or Posterolateral Technique With Posterior Interbody Technique Including Laminectomy And/ Or Discectomy Sufficient To Prepare Interspace (Other Than For Decompression), Single Interspace And Segment; Each Additional Interspace And Segment (List Separately In Addition To Code For Primary Procedure)).

- Effective for dates of service on or after March 30, 2011 the modifier AS (PA SVCS For Assistant) has been added to CPT code **27245** (Treatment Of Intertrochanteric, Peritrochanteric, Or Subtrochanteric Femoral Fracture; With Intramedullary Implant, With Or Without Interlocking Screws And/Or Cerclage) on RF618 for PT 19 (Registered Nurse Practitioner).
- Effective for dates of service on or after January 1, 2012 the PT 19 (Registered Nurse Practitioner) can now report the CPT code **27381** (Suture Of Infrapatellar Tendon; Secondary Reconstruction, Including Fascial Or Tendon Graft) with the modifiers AS (PA SVCS For Assistant) and 80 (Assistant Surgeon).
- Effective for dates of service on or after January 1, 2012 the PT 43 (Ambulatory Surgical Center) has been added to the CPT code **27727** (Repair of Congenital Pseudarthrosis, Tibia).
- Effective for the dates of service on or after January 1, 2012 the PT 08 (MD-Physician) can report the CPT code **50593** (Ablation, Renal Tumor(s), Unilateral, Percutaneous, Cryotherapy).
- Effective for the dates of service on or after January 1, 2012 the CPT code **54056** (Destruction of Lesion(s), Penis (e.g., Condyloma, Papilloma, Molluscum Contagiosum, Herpetic Vesicle), Simple; Cryosurgery) can be reported by the provider type 19 (Registered Nurse Practitioner).
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- Effective for the dates of service on or after October 1, 2012 the modifier AS (PA SVCS for Assistant) has been added to the CPT code **59514** (Cesarean Delivery Only) for the PT 09 (Certified Nurse-Midwife).
- Effective for the dates of service on or after January 1, 2012 the CPT code **78452** (Myocardial Perfusion Imaging, Tomographic (Spect) (Including Attenuation Correction, Qualitative Or Quantitative Wall Motion, Ejection Fraction By First Pass Or Gated Technique, Additional Quantification, When Performed); Multiple Studies, At Rest And/Or Stress (Exercise Or Pharmacologic) And/Or Redistribution And/Or Rest Reinjection) has been added to the provider type E1 (Independent Testing Facilities).
- The CPT code **90792** (Psychiatric Diagnostic Evaluation with Medical Services) **has been removed** from PT 11 (Psychologist).



- Effective for the dates of service on or after January 1, 2012 the CPT code **95930** (Visual Evoked Potential (VEP) Testing Central Nervous System, Checkerboard or Flash) has been added to the PT 19 (Registered Nurse Practitioner).
- Effective for the dates of service on or after September 1, 2012 the HCPCS codes **J0280** (Injection, Aminophyllin, up to 250 mg) and **J2785** (Injection, Regadenoson, 0.1 mg) have been added to the PT E1 (Independent Testing Facilities).

### **Revenue Codes**

- Effective for the dates of service on or after April 1, 2013 the revenue codes 0409 (Other Imag Svs) and 0619 (MRI -Other) have been added to the HCPCS code **C9734** (Focused Ultrasound Ablation/Therapeutic Intervention).
- Effective for dates of service on or after October 1, 2012 the Revenue code 0636 (Drugs/Detail Coding) has been added to following HCPCS codes:

J0744 Injection, Ciprofloxacin for Intravenous Infusion, 200 mg  
J2250 Injection, Midazolam Hydrochloride, Per 1 mg

